Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 781 Substitute for Form PTO-875 CLAIMS AS FILED -- PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED / NUMBER EXTRA RATE RATE FEE FEE **BASIC FEE** 380 *.760* (37 CFR 1.16(a)) OR **TOTAL CLAIMS** 0 xs Ir (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS 79₌ 0 x s H (37 CFR 1.16(b)) minus 3 = OR 260 .130= MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 40E * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) **SMALL ENTITY** CI AIMS HIGHEST PRESENT REMAINING NUMBER RATE RATE ADDI-ADDI-ENT **EXTRA** TIONAL **PREVIOUSLY AFTER** TICNAL AMENDMENT FEE PAID FOR FFF Total Minus (37 CFR 1.16(c)) END OR. Independent (37 CFR 1.16(b)) Minus 1 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADO'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** AMENDMENT **AFTER PREVIOUSLY** TIONAL TIONAL **AMENDMENT** PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus フロ OR Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **EXTRA** TIONAL TIONAL AFTER **PREVIOUSLY AMENDMENT** PAID FOR FEE FFF Total (37 CFR 1.16(c)) ENDMI Minus S OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ... (37 CFR 1.16(d)). OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3" The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 **CLAIMS AS FILED - PART I** SMALL ENTITY (Column 1) (Column 2) TYPE OR **TOTAL CLAIMS** RATE FEE OR BASIC FEE FOR NUMBER FILED **NUMBER EXTRA BASIC FEE** 150.00 TOTAL CHARGEABLE CLAIMS minus 20≈ X\$ 25= OR INDEPENDENT CLAIMS minus 3 = X100= OR MULTIPLE DEPENDENT CLAIM PRESENT +180= OR * If the difference in column 1 is less than zero, enter "0" in column 2 **TOTAL** TOTAL OR **CLAIMS AS AMENDED - PART II** SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-REMAINING NUMBER PRESENT RATE TIONAL **PREVIOUSLY AFTER EXTRA AMENDMENT PAID FOR** FEE Total Minus X\$ 25= OR

		(Column 1)		(Column 2)	(Column 3)		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	*	Minus	**			
	Independent		Minus	***	=		
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						

Minus

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE		RATE	.ADDI- TIONAL FEE
X\$ 25=		OR	X\$50=	
X100=		OR	X200=	
+180=		OR	+360=	
TOTAL ADDIT FEE		OR	TOTAL	

OR

OR

X100=

+180=

ADDIT. FEE

TOTAL

OTHER THAN

SMALL ENTITY

FEE

300.00

ADDI-

TIONAL

FEE

RATE

X\$50=

X200=

+360=

RATE

X\$50=

X200=

+360=

TOTAL OR ADDIT. FEE

OTHER THAN

AMENDMENT	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					
	Independent	*	Minus	tes	=	
	Total .	*	Minus	'## ·	=	
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
		(Column,1)		(Column 2)	(Column 3)	

ADDI-ADDI-TIONAL RATE RATE TIONAL FEE FEE X\$ 25= X\$50= OR X100= X200= OR +180= +360= OR TOTAL TOTAL ADDIT. FEE ADDIT. FEE

AMENDMENT

Independent

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.